## REQUEST FOR ALLOCATION/allotment

San Luis Obispo County Department of Planning and Building 

Website: http://www.sloplanning.org

## REQUEST FOR ALLOCATION (\$650\*) □

REQUEST FOR ALLOTMENT ( $\$650 \text{ or } \$150^{**}$ )

Date:

Revised 8/25/05

## \* A fee of \$650 must be submitted for each unit requested (one per request form - \$500 will be credited to the building permit when it is filed). Fees for allocations for Multi-Family and Planned Development Projects are \$150.00 + \$500.00 per unit. \*\* The fee for an allotment that is put on a waiting list is \$650 (\$500 will be credited to the building permit when it is filed). The fee for an allotment which can immediately proceed with a building permit submitted is \$150. NOTE: ALL FEES ARE NON-REFUNDABLE APPLICANT INFORMATION PLEASE PRINT \_\_\_\_\_ Daytime Phone \_\_\_\_\_\_ Landowner Name \_\_\_\_\_ Mailing Address \_\_\_\_\_ City \_\_\_\_ \_\_\_\_\_ Zip \_\_\_\_ Email Address: Complete if different than Landowner Applicant Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Mailing Address \_\_\_\_\_ City \_\_\_\_ Email Address: PROJECT INFORMATION Check the single Project Code that best describes your proposed project (see below for codes) PLEASE CONTACT THE DEPARTMENT OF PLANNING AND BUILDING AT (805) 781-5600 IF YOU NEED HELP DEFINING THE TYPE OF PROJECT. AFTER JULY 2003, ALLOCATIONS ARE ONLY ALLOWED FOR CAMBRIA, LOS OSOS MORATORIUM AREA, COUNTY SERVICE AREA 10A IN CAYUCOS AND CERTAIN VESTED MAPS. Code Description □ SFD Single Family Dwelling (stick-built or mobilehome) Multi-Family Dwelling (duplex, triplex, apartments, condos, townhouses) ☐ MFD □ CU Caretaker Unit (only where allowed by the Land Use Ordinance/Coastal Zone LUO) Planned Development (only for parcels in certain pre-approved planned communities) ☐ SBD Provide the number of proposed dwelling units (Put a "1" here if you are proposing a Single Family Dwelling) HAVE YOU APPLIED FOR OTHER ALLOCATION(S) OR ALLOTMENT(S) IN THE CURRENT FISCAL YEAR? Yes □ No □ If Yes - how many?\_\_\_\_ PROPERTY INFORMATION Assessor Parcel Number (This is a 9 digit number from your property tax bill): Provide the parcel size: □ acres or □ square feet Provide any additional information (associated permits, lot numbers, etc.) connected to this request: **LEGAL DECLARATION** I, the owner of record of this property have completed this form accurately and declare that all statement here are true. I do hereby grant official representatives of the county authorization to inspect the subject property. If you are not the owner, please complete the "Consent of Landowner" page of this application. Property owner signature Date Stamp OFFICE USE ONLY Fee \$ Permit # Identify Category #\_\_\_ Receipt Number:\_\_\_\_ Data Entry By: \_\_\_ Legal Lot Status: ☐ Y ☐ N ☐ U

Staff Approval: \_\_\_

Legal Form Given: ☐ Y ☐ N

## CONSENT OF LANDOWNER

San Luis Obispo County Department of Planning and Building File No. \_\_\_\_\_

I (w	ve) the undersigned owner(s) of record of the	te fee interest in the parcel of land located at: (print address):  : identified as Assessor Parcel Number for	
		and division, general plan or ordinance amendment, or LAFCO application g an approval for:	
ecif		single family residence; or general plan amendment), do hereby certify	
1.	Such application may be filed and processed with my (our) full consent, and that I (we) have authorized the agent named below to act as my (our) agent in all contacts with the county and to sign for all necessary permits in connection with this matter.		
2.	I (we) hereby grant consent to the County of San Luis Obispo, its officers, agents, employees, independent contractors, consultants, sub-consultants and their officers, agents, and employees to enter the property identified above to conduct any and all surveys and inspections that are considered appropriate by the inspecting person or entity to process this application. This consent also extends to governmental entities other than the county, their officers, agencies, employees, independent contractors, consultants, sub-consultants, and their officers agents or employees if the other governmental entities are providing review, inspections and surveys to assist the county in processing this application. This consent will expire upon completion of the project.		
3.	If prior notice is required for an entry to survey or inspect the property. Please contact:		
	Print Name:	Daytime phone:	
	Print Address:	City/State:	
4.	I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:		
<u>Per</u>	rson or entity granting consent:		
Prin	nt Name:		
Prin	nt Address:		
Day	ytime Telephone Number:		
Sigi	nature of landowner:	Date:	
<u>Aut</u>	thorized agent:		
Prin	nt Name:		
Prin	nt Address:		
Day	ytime Telephone Number:		
Signature of authorized agent:		Date:	